The Aging Population And Their Health Policies: Social Policy Outline

Policy Paper Outline:

The policies and legislation surrounding the aging population in relation to their mental health will be the primary topic discussed and analysed within my critical policy analysis paper. My paper will discuss how these policies both try to support those in the aging population, though how the policies are not always put into place as they should. My introduction within the paper will outline the basis of the current benefits available regarding the aging/senior population and the health care initiatives implemented towards them.

The primary topics that I will touch upon within my analysis will include first and foremost its definition and a statement of what policies and government resources are currently in place for the aging population. Furthermore, I will explain the problems with such policies and what responses have been directed towards it, along with what is currently lacking in the system. Not only that, but I will discuss the links between its policy and its practice, the theoretical framework it is built off of, along with recommendations to how the system and the current policies in place could improve strategically.

Introduction:

As each decade passes by, the senior population has continued to grow larger and larger, with a quarter of the population expected to be within the elder adult aging range by 2050 (CHSRF, 2011). With the aging population ever growing, the policies regarding them -- particularly their health care and the money they receive to aid them in daily living -- have developed as well. As individuals get older, the health issues that they must deal with expand; these issues including illnesses that are both mental and physical. Not only must seniors seek assistance with their physical health due to higher risk of diseases, but with their mental health due to the isolation and other trauma they may have experienced. The social benefits currently in place include the Canada Pension Plan (CPP) which is an earnings-related social insurance program, an Old age Security (OAS) pension taken from general revenues that nearly all older adults above 65 receive, and finally the Guaranteed Income Supplement (GID) which is a non taxable benefit that is offered to low-moderate income seniors (Wiseman, M., Ycas, M., 2008). Though in concept it may seem as if there are many opportunities for this population to get aid, these individuals are not always eligible for the funding nor do they necessarily receive a sufficient amount, especially when it comes to caregiving and health related needs. Additionally, the government feels as if they will ultimately lose money if they focus too much funding on this group of individuals, due to viewing them as ‘consumers’ rather than ‘producers’, (Biglieri, S., Hartt, M., n.d.); at a whole viewing them as more of a burden than a necessity. With that in mind, the primary social problem to focus on will be the lack of sufficient resources for this population due, particularly in terms of health.

Theoretical Framework:

The theoretical framework that my analysis will follow in the paper will be disengagement theory. The disengagement theory of aging follows the variables of “the individual’s age with its implied relation to death (...) and society’s stance towards disengagement” (Hochschild, 1975). It implies that the older someone gets, the more likely they are to disengage from society and to become very isolated, and worsen their overall health. This framework is often applied to the senior population, as with deaths and their lives and the loss of family and friends, along with the need for day to day employment or education no longer there can easily keep them stuck at home and alone. In fact, it was found that out of “more than 47,000 suicides that took place in 2017, those 65 and up accounted for more than 8,500 of them” (Axelrod, J., Balaban, S., Simon, S., 2019). Based on this evidence, it is shown that seniors struggle with their health (both mental and physical), thus why the disengagement theory will be the primary one analysed within my work.

Annotated Bibliography:

Axelrod, J., Balaban, S., Simon, S. (2019). Isolated And Struggling, Many Seniors Are Turning To Suicide. NPR.

The mental health of seniors is addressed within this article, with a high focus placed on the aspect of isolation. The article highlights why many seniors may feel this way, along with the inclusion of statistics regarding the unfortunate suicide rates derived from aforementioned poor mental health that comes with this.

Biglieri, S., Hartt, M. (n.d.) Aging and Age-Friendly Policy in Ontatio’s Mid-Sized Cities. Evergreen.

This resource analyses the population of aging adults and the reasoning for why the policies currently place may not be fully supporting them. It describes the socioeconomic changes that are occuring due to the rising amount of aging individuals, including how there are more people relying on government funds and existing as ‘consumers’, rather than people who are working and existing as ‘producers’. It also touches on the ageism present in society, and how the elderly are often forgotten about or pushed to the side as they are not working and productive citizens.

Brink, S. (2004). Elder Care: The Nexus for Family, Work, and Health Policy. The Caledon Institute of Social Policy.

This paper assesses the statistics regarding the elderly and the care system that is available to them, particularly focusing on caregivers within their families that may have to work with them. The focus of the work surrounds how caregivers within the family, and those receiving the care themselves, are affected by the policies in place. It explains how most caregivers work for free at home due to not having the funds or resources to access care elsewhere, and how they receive no benefit from the work that they do. The work explains how the lack of proper resources and funds can negatively impact both the caregiver (due to the high chance of burnout) and the one receiving the care.

Canadian Health Services Research Foundation (CLHIA). (2011). Better with

Age: Health Systems Planning for the Aging Population Synthesis Report.

This resource offers multiple facets of information, including general information about the aging population and how it is continuing to grow. In addition to this, the synthesis report goes into detail about the current policies that are in place that promote strategies for meeting the needs of the population, better integration of these services into society, the focus on promoting prevention strategies for health care issues before they can worsen, giving benefit programs to caregivers, offering technology to seniors, and more. Furthermore, the report speaks upon the limitations and negatives on the current policies, such as the government portraying ageism (viewing the aging as a burden rather than a group they need to support), issues with aiding only specific groups, funding cuts, government leaders not being accountable, etc.

Hochschild, A. R. (1975). Disengagement Theory: A Critique and Proposal. American Sociology Review, Vol. 40, No. 5. pp 553-569.

Within this article, the definition of disengagement theory is explained; stating that it involves different variables in relation to one's age to death and with society's current stance on what disengagement is. In specific, it focuses on the elderly population and debates how relevant the theory is in modern day, while discussing both the positives and negatives regarding its ideologies.

Sharda, N., Genao, L., Pavon, J., White, H., Orto, V., Keith, K., Johnson, S. (2018). Improving Elder Care in a Community Based Hospital. The Journal of Post-Acute and Long-Term Care Medicine, Vol. 8, Iss. 3.

This resource elaborates upon the fact that older adults, aged 65 plus, are the reason for most hospital admissions. It explains how many of these individuals live at high risk for illnesses and other hospital linked complications; the paper overall focuses on how the management of these cases can be improved within the hospital by reforming policies and ultimately creating a more efficient system.

Wiseman, M., Ycas, M. (2008). The Canadian Safety Net for the Elderly. Social Security Bulletin, Vol. 68, No. 2.

Within this journal, specific programs that are currently available for the aging population are discussed. This includes the current pension and government funding plans that they receive (such as retirement benefits), which the authors compared to the plans present in other countries as well. The journal focused particularly on Canadian's 'safety net', speaking upon how the low-income aging population receives benefits from the government. Furthermore, the writers explain how despite these policies and programs existing, they are not perfect and there are many who still suffer and who will continue to suffer due to lack of sufficient resources offered.

Conclusion:

My paper will assess the current policies regarding senior care, including the retirement funds they receive and the health care resources that are available to them. In regards to this analysis

of what is available, the issues involving what is still lacking in senior care, along with how the current policies may not be capable of aiding everyone will be discussed as well. In sum, as the senior population continues to grow, it is of dire importance that the focus placed on their care by the government improves. If funding continues to get cut from the health care and benefits given to seniors, then these individuals will not be capable of receiving the resources they need. My paper will vouch for the rights of seniors and for their ability to access health care in both the physical and mental sense.

Bibliography:

1. Axelrod, J., Balaban, S., Simon, S. (2019). Isolated And Struggling, Many Seniors Are Turning To Suicide. NPR.
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